APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Long Form)

Affidavit in Support of the Application

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Defendant/Respondent

Signed:

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: 11 / 5 /2012

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 1,100	\$ N/A	\$ 1,100	s N ₄
Self-employment	\$ Nove	s N/A	S NONE	SNA
Income from real property (such as rental income)	\$ NONE	\$ N/A	\$ NONE	s N/A
Interest and dividends	\$ NONE	s n/a	s none	s N/A
Gifts	\$ NONE	s //A	s alone	s N/A
Alimony	\$ NONE	s N/A	\$ Hora	s p/A
Child support	\$ NONE	\$ N/A	\$ NINE	\$ N/A

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Retirement (such as social security, pensions, annuities, insurance)	\$ NONE	\$ N/A	\$ NONE	s N/A
Disability (such as social security, insurance payments)	\$ None	\$ N/A	\$ NONE	s N/A
Unemployment payments	\$ NOVE	\$ pl/p	\$ NONE	s N/A
Public-assistance (such as welfare)	\$ NONE	\$ N/A	\$ NONE	\$ N/A
Other (specify):	\$ HONE	\$ pl/p	\$ NONE	\$ 4/4
Total monthly income:	\$ 1,100	\$ N/A	\$ 11.00	\$ N/A

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
WATER SUBMERENCE SYSTEM		APRIL 2012 - MAY 2012	\$ 1200
POBERT HILF		SEPT 2010 - FEB 2011	\$ 1,000

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
4/4	N/A	N/4	\$ ph
N/A	N/A	N/A	\$ 1/4
N/A	N/A	N/A	s u/a

4. How much cash do you and your spouse have? \$ 100.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
TO AMERITRADE	CASH MANUGEMENT	\$ 6.00	\$ Ma ngari
	,	\$	\$ N/A Supress
		\$	\$ NAME

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or you	ır spouse	
Home (Value)	s N/A	
Other real estate (Value)	s N/A	
Motor vehicle #1 (Value)	\$ 3,000	
Make and year: Doyce		
Model: <i>RAM 150</i> 0		
Registration #: AZ AW6100		The second secon
Motor vehicle #2 (Value)	\$ Y/ A	Market St.
Make and year:		
Model:		
Registration #:		
Other assets (Value)	\$ NA)E	
Other assets (Value)	s NONE	

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount ow	Amount owed to your spouse		
NIL	s N/A	s nove			
N/A	s N/A	s None			
NA	s p/a	s None			

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
W/1	N/A	N/A
4/4	4/4	, Na
h \+	n/a	

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included? Yes No Is property insurance included? Yes No	s 475	s µ/æ
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 85	s N/4
Home maintenance (repairs and upkeep)	s none	s NA
Food	s	s N/A
Clothing	\$	s N/A
Laundry and dry-cleaning	s 40	s MATH
Medical and dental expenses	\$ 100	s NA
Transportation (not including motor vehicle payments)	s none	s 10/4 100
Recreation, entertainment, newspapers, magazines, etc.	s None	s N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	s N/A	s W/n
Life:	s n/r	S CIA
Health:	\$ 75	s N/A
Motor vehicle:	\$ 120	SNA
Other:	S NONE	s/s
Taxes (not deducted from wages or included in mortgage payments) (specify):	S NONE	s N/A
Installment payments		
Motor vehicle:	\$ 400	s N/A
Credit card (name):	\$ None	s NA
Department store (name):	\$ NONE	S A/A
Other:	s hone	\$ 114
Alimony, maintenance, and support paid to others	\$ NOWE	s N/A

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Regu statem	lar expenses for operation of business, profession, or farm (attach detailed ent)	\$	s N/#
Other (specify):		\$	s VA
	Total monthly expenses:	s 1,100	s NA
9.	Do you expect any major changes to your monthly income or expenses on next 12 months?	or in your assets	or liabilities during the
	☐ Yes No If yes, describe on an attached sheet.		が数である。 海戦には、 1
10.	Have you paid — or will you be paying — an attorney any money for so including the completion of this form? □ Yes 🗖 No	ervices in connec	tion with this case,
	If yes, how much? \$		
11.	Have you paid — or will you be paying — anyone other than an attorne for services in connection with this case, including the completion of this		gal or a typist) any money Yes X No
	If yes, how much? \$		Hall (Smith) in
12.	Provide any other information that will help explain why you cannot pay 1 HAVE NOT BEEN ABLE TO FIND WARK SINCE THE EARLY PART OF FOUND HAS MAINLY BEEN SHORT FERM, PAYING NO MORE SITUATION AM STRUGGLING FINANCIALLY.	y the costs of the 2012. THE WITT THAN \$12/HX	se proceedings. E Work / Have BECAUSE OF THIS
13.	Identify the city and state of your legal residence. TEMPE, AZ		
	Your daytime phone number: 480 - 382 - 8130 Your age: 400 - 382 - 8130		
	Last four digits of your social-security number: 35 77		- 1